

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KW	68904	3/23/00
O.I.P.E. CLASSIFIER		16	3 29. 00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	9/26/03
Original	9/26/03
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Claim	Date
Final	9/26/03
Original	9/26/03
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53	✓
54	✓
55	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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